

PTO/SB/80 (04-05)
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as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).									
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Assignee N	Name and Addre	268:						· · · · · · · · · · · · · · · · · · ·	
Health Hero Network, Inc.									
2570 W. El Camino Real, Ste. 111									
Mountain View, California 94040									
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be									
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SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee									
Signature		MR			·	Date N	7		
Name	Stephen	J. Brown				Telephoi	ne 650-559-	1000	
Title									
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This collection of information is required by 37.CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer. U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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STATEMENT UNDER 37 CFR 3.73(b)							
Applicant/Patent Owner: Health Hero Network	k, Inc.						
Application No./Patent No.: 09/810,334	Filed/Issue Date: March 14, 2001						
Entitled: AN INTERACTIVE PATIENT COMM HEALTHCARE MANAGEMENT	IUNICATION DEVELOPMENT SYSTEM FOR REPORTING ON PATIENT						
Health Hero Network, Inc.	, a <u>Corporation</u>						
(Name of Assignee)	ype of Assignee, e.g., corporation, partnership, university, government agency, etc.)						
states that it is:							
1. X the assignee of the entire right, ti	the assignee of the entire right, title, and interest; or						
2. an assignee of less than the entit	an assignee of less than the entire right, title, and interest						
The extent (by percentage) of its ownership interest is % in the patent application/patent identified above by virtue of either:							
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The undersigned (whose title is supplied below	w) is authorized to act on behalf of the assignee.						
Maichael 2- 12 May 23, 2005							
Signature	Date						
Michele V. Frank, Esq.	703-744-8000						
Printed or Typed Name	Telephone Number						
Legal Representative							
Title							

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